PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  CLAIMS AS FILED - PART 1  (Column 1) (Column 2)  TOTAL CLAIMS 3 2 minus 20	DATENT	ADDI IOATI		neveni.		****		-1	<b>Application</b>	on or	Docket Nu	<b>mpe</b> r
CLAIMS AS PILED - PART I  (Column 1)	PAIDNI					ION HECK	JKU		097	89	477	•
TOTAL CLAIMS  OR  NUMBER FILED  MURABER EXTRA  PRATE  FEE  BASIC F				•		umn 2)	S	MALLE		•	OTHE	
TOTAL CHARGEABLE CLAIMS 3.2 minus 20= 1/2 X\$ 9= OR X\$18= 2.16.00 OR X\$18=	TOTAL CLAIMS						ſ		FEE	7		
TOTAL CHARGEABLE CLAIMS 3.2 minus 20= 1.2 X\$ 9= OR X\$18= 2.16.00 OR X\$00= 30.00 O	FOR		NUMBE	RFILED	NUM	BER EXTRA						
ALUTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is issist than zero, enter "O" in column 2  If the difference in column 1 is issist than zero, enter "O" in column 2  Column 1)  (Column 2)  (Column 3)  (Column 4)  (Column 3)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Colu	TOTAL CHARGE	ABLE CLAIMS	32 m	inus 20=	•	12	I	X\$ 9=		7	1	
HILTIPLE DEPENDENT CLAIM PRESENT  If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR *270=  TOTAL  PRESENT  RATE TIONAL  FEE  TOTAL  FEE  TOTAL  ADDITIONAL  FEE  TOTAL  OR *270=  TOTAL  ADDIT FEE  OR *270=  TOTAL	NDEPENDENT C	LAIMS	4/ 1	ninus 3 =	•	1	ŀ	Y40-	<del> </del>	┫¨	Yes	
If the difference in column 1 is less than zero, enter "O" in column 2    Column 1   Column 2   Column 3	MULTIPLE DEPE	NDENT CLAIM	PRESENT				F			7		800
Column 1)  (Column 2)  (Column 3)  (Column 4)  (Column 3)  (Column 4)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 1)  (Column 8)  (Column 1)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 3)  (Column 3)  (Column 1)  (Column 3)  (Column 3)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 3)  (Column 4)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 8)  (Column 1)  (Column 8)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 3)  (Column 3)  (Column 3)  (Column 3)  (Column 4)  (Column 3)  (Column	If the difference	in column 1 is	leisa than z	taro, antai	**************************************	column 2				J'''		
Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY O							.;	TOTAL		OR		
REMAINING AFTER PREVIOUSLY PAID FOR PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA PRESENT FIRE SENTATIONAL FEE TOWAL FEE	2/1/18/0.10	(Column 1)	MMENDE	(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR		
HRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		REMAINING AFTER		PREVIO	BER			RATE	TIONAL		RATE	TIONAL
Column 1   Column 2   Column 3	Total	. 32 .		-3	2	-		X\$.9=		OR	X\$18=	1
Column 1)   Column 2)   Column 3)   Column 3    Colu	Independent FIRST PRESE	NTATION OF M			<u>-1.</u>	-67		X40=		OR	X80=	
Column 1) (Column 2) (Column 3)  REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT EXTRA PRESENT EXTRA PRESENT EXTRA PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total . 3/3 Minus . 3/2 =   X\$ 9= OR X\$18= 50 - X40= OR ADDIT. FEE  (Column 1) (Column 2) (Column 3)  (Column 3) (Column 4)			<u> </u>	J ENDERY	Cridin			<b>-135</b> =		OR	+27.0=	
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT PREVIOUSLY PAID FOR PRESENT PREVIOUSLY PAID FOR PRESENT PREVIOUSLY PAID FOR							AD			OR	TOTAL ADDIT FEE	\$
REMAINING ATTER PREVIOUSLY PAID FOR TOTAL ADDIT. FEE OR AD	3/1/0>					(Column 3)						
Column 1   Column 2   Column 3		REMAINING AFTER		NUME PREVIO	ER USLY			RATE	TIONAL		RATE	TIONAL
Total   Minus   Minu	Total	• 33	Minus	•• 3	32	=	.   7	<b>(\$ 9=</b>		OR	X\$18=	
+135= OR +270=  (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER PREVIOUSLY PAID FOR AMENDMENT PREVIOUSLY PAID FOR TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE	Indépendent	5			7		-	K40=	··		X80=	
(Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AFTER AMENDMENT Represent Previously Paid For In This space is less than the entry in column 3.  Total the Highest Number Previously Paid For In This space is less than 20, enter 20.  Total the Tighest Number Previously Paid For In This space is less than 20, enter 20.  Total ADDIT. FEE  OR ADDIT. FEE  ADDIT. FEE  OR X\$18=  TOTAL ADDIT. FEE  OR TOTAL ADDIT. FEE	TINOT PRESE	VIATION OF ME	JUIIPLE UE	PENDENT	CLAIM	لللل	1.	135=			+270=	
COlumn 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AFTER AFTER AMENDMENT PREVIOUSLY PAID FOR  Independent  Minus  Mi	<u> </u>						اب ۱۳۰			OR		250-
REMAINING AFTER APOI- AFTER AMENDMENT PREVIOUSLY PAID FOR EXTRA  Total • Minus •   Independent • Minus •   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  The entry in column 1 is less than the entry in column 2, write "V" in column 3.  The Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20, enter "20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.  If the Highest Number Previously Paid For in This SPACE is less than 20.						(Cotumn 3)					OUI. FEE	
Total • Minus •		REMAINING AFTER		NUMB! PREVIOL	ER ISLY		F		TIONAL		RATE '	TIONAL
Independent • Minus •••   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  The entry in column 1 is less than the entry in column 2, write 'V' in column 3.  The Highest Number Previously Paid For' in This SPACE is less than 20, enter '20.  The Highest Number Previously Paid For' in This SPACE is less than 20, enter '20.  The Highest Number Previously Paid For' in This SPACE is less than 20, enter '20.  TOTAL ADDIT. FEE	Total		Minus				一	50-			Y810-	
1 the entry in column 1 is less than the entry in column 2, write 'V' in column 3.  If the "Righest Number Previously Paid For" in THIS SPACE is less than 20, enter '20."  If the "Righest Number Previously Paid For" in THIS SPACE is less than 20, enter '20."  ADDIT. FEE  ADDIT. FEE	Independent		Minus	***			$\vdash$			OR		
If the entry in column 1 is less than the entry in column 2, write "V" in column 3.  If the Trighest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20."  If the Trighest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  ADDIT. FEE	FIRST PRESEN	ITATION OF MU	LTIPLE DEP	ENDENT (	MIAK		LX	40=		OR	X80=	
The Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20. ADDIT. FEE ADDIT. FEE ADDIT. FEE	f the entry in column	n 1 is less than the	e entry in cohi	no 2. write 1	T in ont	mn 3				OR		
	IT DIE THEETHESE Numb	ber Previousiv Pal	ld For IN THE	S SPACE In L	nest then	20 Antor "20 *				OR A		

Patient and Trademark Office, U.S. DEPARTMENT OF COMMERCE \*U.S. GPO: 2000-469-708/20100